

MISSOURI DEPARTMENT OF LABOR AND INDUSTRIAL RELATIONS
DIVISION OF WORKERS' COMPENSATION

2004 Annual Report



Table of Contents

From the Director	Page 2
Introduction.....	Page 3
How To Contact the Division.....	Page 5
Program Descriptions	Page 6
Injury and Claim Processing.....	Page 6
Adjudication and Early Dispute Resolution.....	Page 7
Insurance and Proof of Coverage.....	Page 8
Workers' Safety Program	Page 8
Physical and Vocational Rehabilitation	Page 9
Medical Fee Disputes	Page 10
Second Injury Fund.....	Page 11
Fraud and Noncompliance	Page 11
Tort Victims' Compensation.....	Page 12
Crime Victims' Compensation	Page 13
Major Findings	Page 14
Program Statistics.....	Page 15
Publications.....	Page 31

Message from Patricia "Pat" Secrest

Director, Division of Workers' Compensation

The Missouri Division of Workers' Compensation is committed to providing superior customer service to the employers and employees of the state. Our safety, adjudication and information services are designed to assist participants in the workers' compensation system to reduce injuries in the workplace, decrease costs associated with those injuries and help our customers resolve issues in a fair and impartial manner.

In the coming years, the Division will place a great deal of emphasis on outreach and information. Our goal is for the Division to become a positive asset to employers and injured workers so that the workers' compensation system in Missouri does not become mired in discord and difficulties that have plagued the system in the past. An open forum to discuss issues, improved efficiency and effective communication represent a winning proposition for all participants in the system.

I left retirement to accept the challenge as the Director of the Division of Workers' Compensation. As a former teacher, legislator and small business owner, I am about identifying challenges and problems and finding reasonable and positive solutions.

The Division will take the lead in being an effective resource for employers and employees. I look forward to working with the workers' compensation community in 2005 and beyond to further enhance the services the Division provides.

Sincerely,

Patricia "Pat" Secrest
Director, Division of Workers' Compensation

Introduction

The Missouri Workers' Compensation law was first enacted on April 30, 1925, and took effect in November 1926 following voter approval. The new law had widespread approval from political parties, business and labor, and obtained voter approval by more than a two-to-one margin. Before the new law was enacted, injured workers could only seek redress from their employers in civil court for a work-related injury. To win the case, a worker had to prove employer negligence. Employers could prevail even if the worker proved negligence, if the employer could prove negligence by the worker. These civil cases were often long and expensive. The process most times resulted in high settlements or jury awards for prevailing workers with serious injuries, but did little for workers with minor injuries or for workers not having strong cases of employer negligence.

The 1925 agreement on the workers' compensation law required major concessions by management and labor. Management's concession allowed a no-fault system in exchange for labor's concession of exclusive remedy. The no-fault system was designed to allow faster recovery for workers who had job-related injuries. Under the no-fault system, an injured worker is paid compensation regardless of fault. Compensation was paid at rates set by the legislature. The intent of the no-fault system was to make benefit payments for work-related injuries a simple administrative procedure without requiring the courts to determine fault.

Labor's concession of exclusive remedy requires employees to file all claims for work-related injuries through the workers' compensation system. This provision protects employers from large settlements or jury awards resulting from civil cases and requires employees to resolve work-related injury claims at limited compensation rates.

Workers' compensation systems have been in place in all states since 1949. Each state's system is unique, but the characteristics of no-fault and exclusive remedy are universal. Other than these

similarities, states vary in their laws and how their workers' compensation system operates. It is important for employers that operate in more than one state to familiarize themselves with the workers' compensation laws of each state in which they conduct business.

The Missouri Workers' Compensation law requires all employers with five or more employees, one or more employees if in the construction industry, to provide compensation benefits to workers who become sick or injured as a result of their employment. The law provides three types of benefits for a person who is injured while performing work-related duties.

1. The worker is entitled to receive reasonable medical treatment to cure and relieve the work-related injury at a cost borne by the employer or the employer's insurance carrier. The employer has the legal right to select the treating physician. However, the employee may select a treating physician at the employee's own expense.
2. If the worker misses more than three days of work due to a work-related injury, he or she is entitled to a lost wage benefit referred to as a temporary total disability (TTD) benefit. The TTD benefit generally equals two-thirds of the injured employee's average weekly wage, not to exceed a maximum rate set by the legislature. An injured worker may also be entitled to temporary partial disability (TPD) if he or she is released to return to work and perform "light duty" at lower wages.
3. The worker is entitled to compensation for the permanent effect of the injury. If the disability is less than total the worker will receive a lump sum amount based upon the extent of the disability. If the disability is total, the worker may receive benefit payments for life or a lump sum settlement.

Any injury caused by a job-related accident is covered under the Missouri Workers' Compensation law. This coverage extends from first-aid type injuries to serious accidents and death. Workers are covered from the first minute they are on the job and the coverage continues during all times they are working for the employer. The worker, if injured on the job, must notify his or her employer of the injury. Thereafter, every self-insured employer or the employer's insurer is required by law to notify the Division of Workers' Compensation of each accident resulting in personal injury or death to any worker. Such notification must be done within ten days after knowledge of the accident. Employers or insurance carriers notify the Division by using a form called a First Report of Injury.

Most Missouri workers are covered under the Missouri Workers' Compensation law. Many employers purchase workers' compensation insurance from an insurance carrier. When a worker has a compensable injury, the employer's insurance carrier pays the medical bills and benefits at the limits set by law. Medical benefits are paid in full and are unlimited until recovery from the injury is completed. Disability benefits are paid to compensate an injured worker for time away from his or her employment or for future lost job opportunities as a result of the injury. The disability benefit paid for any permanent residual effect of the worker's injury is based on: 1) the weekly statutory value assigned to the injured body part; 2) the percentage of disability; and 3) the worker's weekly compensation rate.

The Missouri Workers' Compensation law itself has been amended considerably over the last 75 years to adapt to economic, political and social forces, although the concepts of no-fault and exclusive remedy have remained the hallmarks of the workers' compensation system. As the economic and social makeup of the state of Missouri has changed, so have the benefit levels paid to injured workers and the number of workers who have participated in the system.

The Division's administrative organization is designed to promote a fair and amicable settlement between the parties, resulting in a minimum of formal litigation. As the chief administrative officer, the director guides the affairs of the Division. Assisting in the administrative duties are the chief legal advisor, deputy director and the chief administrative law judges assigned to local offices.

The Division's central office is in Jefferson City. In addition, pre-hearing conferences mediations, hearings and conferences are held in eight full-time adjudication offices located throughout the state: Cape Girardeau, Jefferson City, Joplin, Kansas City, Springfield, St. Charles, St. Joseph, and St. Louis. Adjudication proceedings are also conducted in 34 separate locations, in addition to the permanent local offices. Legal staff consists of 26 administrative law judges, aided by 21 legal advisors. The Division employs a staff of 176 full-time employees specifically involved in workers' compensation.

How To Contact the Division

Missouri Division of Workers' Compensation
(Central Office)

P.O. Box 58

Jefferson City, MO 65102-0058

(573) 751-4231

Internet Home Page: www.dolir.mo.gov/wc

Employee Toll Free Information Line:
(800) 775-2667

Employer Toll Free Information Line:
(888) 837-6069

Missouri Workers' Safety Program

P.O. Box 58

Jefferson City, MO 65102-0058

(573) 526-3504

Dispute Management Unit

P.O. Box 58

Jefferson City, MO 65102-0058

(573) 526-4951

Insurance Unit

P.O. Box 58

Jefferson City, MO 65102-0058

(573) 526-6004

Benefits Unit – Rehabilitation, Medical Fee Disputes
and Second Injury Fund

P.O. Box 58

Jefferson City, MO 65102-0058

(573) 522-1467

Fraud and Noncompliance Unit

P.O. Box 1009

Jefferson City, MO 65102-1009

(800) 592-6003

Local Office Directory

Cape Girardeau

Phone: (573)-290-5757

Jack Knowlan, Chief Administrative Law Judge

3102 Blattner, Suite 101

63701

Jefferson City

Phone: (573)-751-4231

Robert Dierkes, Chief Administrative Law Judge

PO Box 58

3315 W. Truman Blvd.

65109

Joplin

Phone: (417)-629-3032

Robert House, Chief Administrative Law Judge

3311 Texas

64801

Kansas City

Phone: (816)-889-2484

Kenneth Cain, Chief Administrative Law Judge

1805 Grand Avenue, 4th Floor

64108

Springfield

Phone: (417)-888-4100

Margaret Holden, Chief Administrative Law Judge

1736 E. Sunshine, Suite 610

65804

St. Charles

Phone: (636)-940-3326

Leslie E.H. Brown, Chief Administrative Law Judge

3737 Harry S Truman Blvd

63301

St. Joseph

Phone: (816)-387-2275

Nelson Allen, Chief Administrative Law Judge

525 Jules Street

64501

St. Louis

Phone: (314)-340-6865

Jennifer Schwendemann, Chief Administrative Law Judge

111 North 7th Street, Rm 250

63101

Program Descriptions 2004

Injury and Claim Processing

The Division is responsible for receiving and processing all documents and information pertaining to a reported work-related injury. Division staff are responsible for data entry and case review. Case review staff are responsible for maintaining injury files, collecting medical and return-to-work information and contacting insurance companies and employers to update case files. Data entry staff are responsible for entering data from the First Report of Injury (WC-1-EDI), the Claim for Compensation (WC-21) and the Answer to the Claim for Compensation (WC-22). Additional staff of the Division are responsible for scanning and indexing all documents into the proper paperless file. In order to accomplish these responsibilities and gather necessary information, the Division employs the use of several forms and form letters.

Every work-related injury and occupational disease, occurring in Missouri, except minor first aid cases, must be reported to the Division. The First Report of Injury form (WC-1-EDI) is used to file the information.

In Calendar Year 2004 there were 142,357 injuries reported to the Division of Workers' Compensation

An injured worker has the right to file a claim to initiate a contested case with the employer and insurer. A claim is also filed to toll (stop) the statute of limitations from expiring. The Claim for Compensation (WC-21) is entered in the Division's computer system and sent to the employer/insurer following receipt by the Division.

An employer or insurer must respond to a claim for compensation within 30 days, on a WC-22 form, Answer to Claim for Compensation. Division

staff process answers to claims in a manner similar to processing claims. Copies are sent to the employee and the employee's attorney when applicable.

Employees filed 21,662 Claims for Compensation in 2004. Of these, 13,464 included a claim for Second Injury Fund benefits.

The employer or insurer must complete the Notice of Commencement/Termination of Compensation Payments (WC-2). This form is required as soon as compensation payments begin for a disability lasting longer than three days and should be filed with the WC-1-EDI, Report of Injury, unless that form was previously submitted.

The employer or insurer also must file this form when the final payment for temporary total or temporary partial disability is paid to an injured worker. If the total time period for payment of temporary total disability is less than thirty days, a report after the final payment is all that is required. It is then evaluated by the Division to determine if the amount of payment is correct. If the calculation is found to be incorrect and the employee was not paid the correct amount, the self-insured employer or insurance carrier is notified by the Division. If the amount paid is correct, the form is coded and routed for case review. Once data entry is complete, the documents are scanned into the Division's paperless file.

The medical report portion of the WC-2 is required from the self-insured employer or insurance carrier for each doctor's visit. The report is evaluated to determine if it is a final report or if further treatment or information is needed. A determination is made as to whether more data is needed, the case can be closed, or the case should be forwarded to the local office to be set on a docket.

Adjudication and Early Dispute Resolution

The primary responsibility of the Division of Workers' Compensation is to assist the parties in resolving all cases of work-related injuries and occupational diseases. An important component of this responsibility is to provide fair and equitable administrative adjudication services in a timely and cost effective manner. When the parties to workers' compensation cases resolve their issues through evidentiary hearings instead of settlement, the costs for injured workers and employers increase considerably.

The Division's administrative organization is designed to promote a fair and equitable settlement between the parties with a minimum of litigation. The Division has 47 administrative law judges and legal advisors in eight local offices around the state. The adjudication staff assists employers and workers in settling disputes that may arise because of the injury.

One of two tracks may be used to help parties resolve workers' compensation cases: the non-contested track or the contested tracks. The non-contested track begins with the filing of a First Report of Injury (FRI) by the self-insured employer or insurer. When the worker has been fully released to work and there is an indication there is a permanent effect of the injury, the parties come to a conference setting with an administrative law judge or legal advisor to resolve the payment of permanent partial disability benefits. The conference is usually conducted using mediation techniques to reach a settlement agreement that both parties accept and sign.

The Division's adjudication staff held 22,463 conferences in 2004.

A contested case begins when the injured worker files a Claim for Compensation (WC-21)

requesting benefits. The claim is usually filed if the injured worker believes the employer/insurer is not paying or providing all required benefits. The case may then be set for a pre-hearing conference, mediation or evidentiary hearing. The pre-hearing conference and mediation are settings designed to resolve the case as quickly as possible. Depending on the local office rules, the pre-hearing conference may be as involved as a mediation.

In 2004, the adjudication staff held:
60,615 Prehearings
22,592 Mediations
929 Hearings

To minimize the costs for parties to a case, the Division's Dispute Management Unit services are specifically designed to resolve disputes quickly in the early stages of the case while still preserving the rights of all parties involved.

The mediators in the Dispute Management Unit assist both workers and employers by providing information and facilitating communication. Mediations, designed to resolve medical issues and the payment of temporary benefits, are primarily conducted by telephone. This is a voluntary process and the parties do not need to be represented by legal counsel to participate in this informal mediation system.

Although not part of the Dispute Management Unit, the central office has three information specialists who respond to inquiries from injured workers calling on the employee information line (800-775-COMP). Often, cases are identified that may benefit from mediation, and those calls are transferred to the mediators. The information specialists also handle the employer information line (888-837-6069) to respond to employer inquiries.

In 2004, Information Specialists handled over 40,000 calls from injured workers.

Insurance and Proof of Coverage

Missouri law allows employers to meet their workers' compensation liabilities through an alternative method known as self-insurance. When an employer qualifies to become self-insured, it becomes financially responsible for all workers' compensation liabilities incurred. Self-insurance has proven to be a cost effective alternative for employers with the means to assume the associated financial risk.

There are two types of self-insurance allowed by statute: individual or group trust. Individual self-insurance requires the employer to be wholly responsible for its workers' compensation liabilities. Therefore, only larger employers will normally meet the requirements. Missouri has stringent requirements that must be met before an employer is granted authority to self-insure, including requirements that relate to financial stability and claims handling ability. Upon approval of the Division, a self-insured employer must also post adequate security to cover losses should the employer become insolvent. In a trust, employers pool their financial resources to distribute risk. More specifically, employers contribute to a loss fund from which claims incurred by members of the trust are paid. If total losses experienced by the group exceed the balance in the loss fund, then each employer must contribute additional funds. There are two types of trusts: homogenous trusts, where members are in similar industry type and heterogeneous trusts where members' businesses may not be similar but who are fellow members of a trade association or group.

As of December 31, 2004, there were 367 individual self-insured employers and 29 self-insured trusts comprised of 3,590 employers.

The Insurance Unit is responsible for regulating all self-insured entities in Missouri. The unit must ensure that all self-insured employers comply with the Missouri Workers' Compensation Law. The unit's primary functions are approval of

new self-insured entities, regulation and oversight of existing self-insured entities, conducting case management and safety audits, and administering the proof-of-coverage program.

In 2004, over 25% of the workforce in Missouri was employed by businesses that self-insure their workers' compensation liability.

The Missouri Workers' Compensation Law provides: "Any insurance company authorized to write insurance under the provisions of this Chapter in this State shall file with the Division a memorandum on a form prescribed by the Division for any workers' compensation policy issued to any employer and any renewal or cancellation thereof." Insurers currently file proof of coverage information electronically with the majority of insurers reporting through the National Council on Compensation Insurance (NCCI). NCCI provides the proof of coverage information to the Division electronically; thereby saving time and money for both the insurer and the Division. Insurers may also report policy information through electronic data interchange (EDI) with a division vendor.

1,725 calls were received by the Division in 2004 inquiring about proof of employers' workers' compensation insurance coverage.

Workers' Safety Program

In 1992, the Missouri Workers' Safety Program was created to assist Missouri's businesses in establishing safe and healthy workplaces. Employers requesting assistance are evaluated against a set of certification standards. On-site consultations are conducted at the request of the employer to evaluate hazards in the workplace.

In 1993, the duties of the Workers' Safety Program were expanded to include the certification and annual review of insurance carrier safety

programs. Each insurance carrier writing workers' compensation insurance in the state must provide the Missouri Workers' Safety Program a written outline of its safety engineering and management program. The insurance carriers' program must be certified by the Division for adequacy by the Division. The Workers' Safety Program performs random on-site visits to insurance company policyholders as a part of the certification and renewal process.

The Workers' Safety Program's safety consultants conducted 125 on-site visits with employers in 2004. Over 13,000 employees worked for those employers and were potentially affected by hazard abatement strategies offered by the consultants.

The Workers' Safety Program informs and educates employers about changes in workers' compensation laws and implementation of workplace safety and health programs of benefit to them and their employees. The staff of workers' safety professionals offers Missouri employers a wide variety of educational and professional expertise in safety and risk management.

The Workers' Safety Program also reviews the safety programs of employers applying for authority to self-insure to determine the efficacy those safety programs. This review helps ensure that an equal level of workplace safety and health assistance is provided to self-insured employers that is available in the commercial carrier market.

The program certifies and maintains a registry of safety consultants and safety engineers. The registry provides Missouri employers with a list of safety consultants and engineers that are recognized as having met the state's certification standards. Copies of the registry are available to any Missouri employer upon request and can be found on the Division's website.

In 2004, the Division certified 9 insurance carrier safety programs.

Physical And Vocational Rehabilitation

The goal of this program is to restore the injured employee, as quickly and as nearly as possible, to a condition of self-support and maintenance as able-bodied workers, through physical or vocational rehabilitation. Qualified employees may receive up to 20 weeks of supplemental benefits from the Second Injury Fund in the amount of \$40 per week.

Only those seriously injured employees receiving physical rehabilitation in a facility certified by the Division are entitled to the extra weekly Second Injury Fund benefit. This does not mean the employee cannot be rehabilitated in other facilities. It does mean, however, if rehabilitated in other facilities, the employee cannot receive Second Injury Fund benefits. To be certified, the facility must meet criteria and specifications for function, personnel, equipment, quality, and facility adequacy. The Division has recently updated the criteria for certification of compliance to current professional standards. Presently, there are over 400 facilities in Missouri certified by the Division of Workers' Compensation.

The Division certified 12 new physical rehabilitation facilities in 2004. At the end of 2004, 451 physical rehabilitation facilities were listed as certified facilities.

The Physical Rehabilitation Program staff investigates and determines employee eligibility to receive benefits. When the employee meets the criteria and is receiving services from a certified facility, the Director issues an order for physical rehabilitation and authorizes the \$40 in weekly payments to be paid to the employee from the Second Injury Fund. In unusual cases, benefits may be provided for periods longer than the specified 20 weeks. Benefits are paid to the employee only during the rehabilitation period. The unit works closely with

attorneys, employees, insurers, case physical rehabilitation services managers and therapists to identify and provide physical rehabilitation services to injured workers.

In 2004, 134 new cases were approved for eligibility of Second Injury Fund rehabilitation benefits.

Employers may also take advantage of the Voluntary Vocational Rehabilitation Program that provides vocational rehabilitation services to severely injured employees. To qualify, an employee must have suffered a severe workplace injury. The employee may receive vocational rehabilitation services, if authorized by the employer, which are reasonably necessary to restore the employee to suitable and gainful employment.

The Division has the responsibility to ensure qualified vocational rehabilitation practitioners and facilities are available and have the capability of providing the appropriate vocational rehabilitation services for the injuries sustained. The Division also has the responsibility of reviewing the written plan of care to ensure the goal of returning the employee to gainful employment is being implemented. To conserve resources and reduce duplication of services, an interagency agreement exists with the Division of Vocational Rehabilitation in the Department of Elementary and Secondary Education to provide these services.

Medical Fee Disputes

The Medical Fee Dispute Program facilitates the resolution of medical fee disputes arising between a health care provider and the self-insured employer or insurer. There are two types of disputes. The first type is when the health care provider has been authorized to provide medical treatment by the self-insured employer or insurer but is paid only a portion of the bill. The health care provider files an Application for Payment of

Additional Reimbursements of Medical Fees with the Division. In this type of dispute the self-insured employer or insurer has typically discounted the bill, and the health care provider is unwilling to accept the discount. The second type of dispute occurs when authorized medical services were provided, but the self-insured employer or insurer has not paid even a portion of the bills. In this case, the health care provider files a Notice of Services Provided and Request for Direct Pay application with the Division. There are numerous reasons why the self-insured employer or insurer may decide to not pay the bill. A frequent reason for the dispute is the self-insured employer or insurer's denial of the compensability of the injury. These types of disputes must be tied to the underlying case and resolved when the case is adjudicated.

The Medical Fee Dispute Unit received 703 applications in 2004. A total of 461 were resolved by the parties.

A Report of Injury or Claim for Compensation for the injured employee must be on file with the Division in order for the Division to have jurisdiction over the dispute. After the application is accepted, the health care provider must attempt to resolve the dispute with the insurer.

This encourages the resolution of the dispute between the health care provider and the self-insured employer or insurer without the intervention of the Division of Workers' Compensation. If unsuccessful, the Division provides a forum to resolve the dispute. Either party may request an evidentiary hearing. To avoid problems and preempt disputes, the Division encourages the health care provider and insurer to enter into long-term economic relationships.

Three evidentiary hearings were held before an administrative law judge in 2004 to settle medical fee dispute issues.

Second Injury Fund

The Second Injury Fund (SIF) is a dedicated fund for the payment of benefits to injured workers. The SIF was created in 1943 to assist disabled veterans in obtaining employment by limiting the liability of employers only to the work related injury incurred in the workplace. Today, the same holds true for any pre-existing injury or disability. The SIF pays benefits to a worker when the current injury, combined with any prior disability, makes the worker permanently and totally disabled. The employer pays only for the current injury and the SIF pays weekly benefits to the worker for the permanent total disability. Since its creation, the SIF has been expanded to include:

1. Payments for permanent partial disability;
2. Medical bills of the injured worker when the employer has failed to insure its workers' compensation liability as required by law;
3. Death benefits for the dependents of a worker killed on the job when the employer is uninsured;
4. Benefits for physical rehabilitation of the injured worker; and
5. Temporary total disability benefits for wages from a second job when the worker is injured on another job.

In 2004, the total number of Claims for Compensation filed against the Second Injury Fund was 13,464. Of those, 12,652 also included a claim against the employer/insurer in the filing and 812 were filed against the Fund only.

The Missouri State Treasurer is the custodian of the SIF, the Attorney General's office defends the SIF, and the Division processes SIF benefit payments. When an employee is eligible for benefits and a compromise settlement has been approved or an award has been issued, the Division processes payments to the injured worker.

In 2004, Second Injury Fund benefits paid by the Second Injury Fund by type were:

Death:	\$ 295,451
Lost Wages:	\$ 277,514
Medical:	\$ 736,964
Permanent Partial Disability:	\$44,643,461
Permanent Total Disability:	\$16,425,309
Rehabilitation:	\$ 173,150

Claims against the Second Injury Fund for permanent total disability, permanent partial disability, lost wages from a second job and uninsured employer medical or death benefits are made by filing a WC-21, Claim for Compensation form, indicating SIF benefits are being sought by the injured worker. Answers to Claims are filed by the Office of the Attorney General representing the SIF.

The Division's SIF payment processing staff continually updates addresses and claimants' marital and death status information to assure proper payments are made for lifetime awards or dependent death payments. The SIF staff also collects surcharge payments from insurance companies authorized to write workers' compensation policies in Missouri and self-insured employers and trusts. These companies are required to submit a Second Injury Fund Surcharge report and payment, if due, on a quarterly basis to the Missouri Division of Workers' Compensation. The SIF staff verifies the reports for accuracy, ensures they are received in a timely manner, corresponds with insurers if there are discrepancies in the report, and then enters all information into a surcharge database.

Fraud and Noncompliance

This unit is responsible for investigating alleged fraud and noncompliance. The unit investigates allegations of fraud by employees, employers, attorneys, insurers and physicians. After a thorough investigation, the Division refers cases where fraud or noncompliance seem likely to the attorney general's office for possible prosecution.

Noncompliance occurs when employers who are required to provide workers' compensation coverage fail to do so. In Missouri, an employer with five or more employees is required to have workers' compensation insurance. The only exception is the construction industry where employers with one or more employees are required to provide coverage.

Noncompliance complaints received in 2004 totaled 1049. In 2004, 391 were referred for prosecution.

In Missouri it is unlawful to:

1. File a fraudulent workers' compensation claim;
2. Submit multiple claims for the same injury;
3. Help others present a fraudulent claim
4. Make or cause to be made any false or fraudulent material statement or material representation for the purpose of obtaining or denying any benefit;
5. To make or cause to be made any false or fraudulent statements with regard to entitlement to benefit with the intent to discourage an injured worker from making a legitimate claim.

It is also unlawful for an insurance company or self-insurer to intentionally refuse to comply with known and legally indisputable compensation obligations, discharge or administer compensation obligations in a dishonest manner or discharge or administer compensation obligations in such a manner as to cause injury to the public or those persons dealing with the employer or insurer.

Any person may file a complaint alleging fraud or noncompliance by either contacting the Fraud and Noncompliance Unit (FNU) or a legal advisor in any of the Division's local offices. All investigations conducted by the FNU are strictly

confidential. Consequently, persons lodging complaints are not provided information on the outcome of the investigation prior to prosecution. A complaint is referred to the Director of the Division of Workers' Compensation. The Director may then refer the case to the Missouri Attorney General for prosecution.

In 2004, 509 fraud complaints were received by the FNU. Of those 31 were referred for prosecution.

Any person convicted of committing fraud is guilty of a class A misdemeanor and is liable to Missouri for a fine not to exceed \$10,000 or double the value of the fraud, whichever is greater. Any employer failing to insure its liability is guilty of a class A misdemeanor and is liable to Missouri for penalty in an amount equal to twice the annual premium the employer would have paid had such employer been insured or \$25,000, whichever is greater. A second conviction of fraud or noncompliance is a class D felony.

Any fines or penalties levied and received as a result of prosecution are paid to the Workers' Compensation Fund. Any restitution ordered as part of the judgment is paid to the persons who were defrauded.

In 2004, fraud and noncompliance referrals resulted in \$578,459.47 in fines and over \$300,000 paid in restitution.

Tort Victims' Compensation

The Missouri Tort Victims' Compensation Fund was established by legislation passed in 1987. Revenue into the fund is generated by a portion of moneys paid as punitive damages in civil lawsuits in Missouri. The Division administers the Tort Victims' Compensation Program because the Division has a mechanism to hear appeals to administrative determinations.

In 2001, the Missouri General Assembly enacted legislation authorizing claims to be made from the fund and gave the Division responsibility of evaluating and paying claims.

The fund compensates people who have been injured due to the negligence or recklessness of another (such as in a motor vehicle collision or hunting accident), and who have been unable to obtain any or part of a court ordered judgment entered against the defendant because the party at fault had inadequate or no insurance, filed for bankruptcy, or for other reasons specified in the law.

Crime Victims' Compensation

The Crime Victims' Compensation Program provides financial assistance to victims who have suffered physical harm as a result of violent crime. In the case of death, the program provides assistance to the victim's dependents. The Crime Victims Program is designed to assist victims of violent crimes through a period of financial hardship as a payor of last resort. If a victim has exhausted other sources of compensation, such as health insurance, and has no other source of reimbursement, the program can help pay for medical costs, wage loss, psychological counseling, funeral expenses and support for dependent survivors to a maximum limit of \$25,000.

Like the Tort Victims' Compensation Program, the Crime Victims' Compensation Program is administered by the Division of Workers' Compensation in order to provide adjudication services that may be required in disputes that may arise.

Major Findings

There has been a significant reduction in workplace injuries in Missouri since 2000. Although the decrease in reported injuries shows an 18.8% decline over the five year period, the decline appears to be leveling off as shown in Table 1.

Despite a flattening of reported injuries, the decrease in reported injuries over the last five years is most likely attributed to employers instituting safety procedures in the workplace. Significant strides have been made in safety over the last several years and employers have become more conscious of the impact safety controls can have on injury occurrence.

As seen in Table 2, Claims for Compensation filed by the employee are showing a decrease overall. In addition, Table 16 shows a leveling off of total Claims filed against the Second Injury Fund in those cases where the Claim is also filed against the employer/insurer. However, Claims filed against the Second Injury Fund only continue to rise.

While the number of cases where Temporary Total Disability is paid has dropped as a result of a lower number of reported injuries, the average cost of those cases continues a gradual rise (see Table 3). The same holds true for Permanent Partial Disability cases (Table 4) and Medical Only cases (Table 5) and the average cost of medical only cases shows the greatest increase.

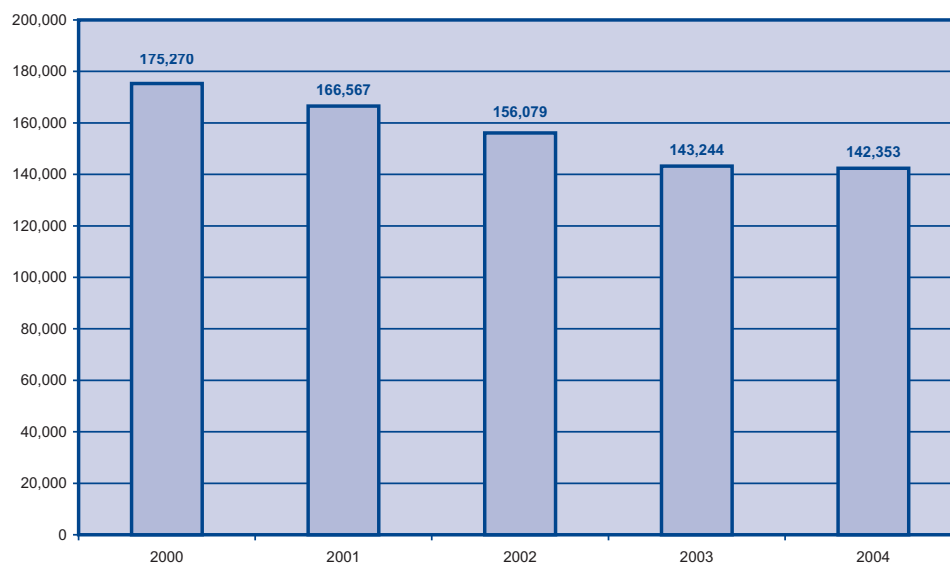
Permanent Partial Disability and Permanent Total Disability benefit payments from the Second Injury Fund (Table 15) have increased significantly from 2003 to 2004 as well as over the five- year period. Since 2004, Permanent Partial Disability benefit payments from the Second Injury Fund have risen 118% or \$24,192,633. The increase from 2003 rose 15% or \$5,814,077. For Permanent Total Disability benefit payments, the five-year increase was 107% or \$8,507,026 and 25% or \$3,254,386 for 2004 compared to 2003.

Program Statistics

This section of tables and charts provides statistical data for the last five calendar years 1999-2003

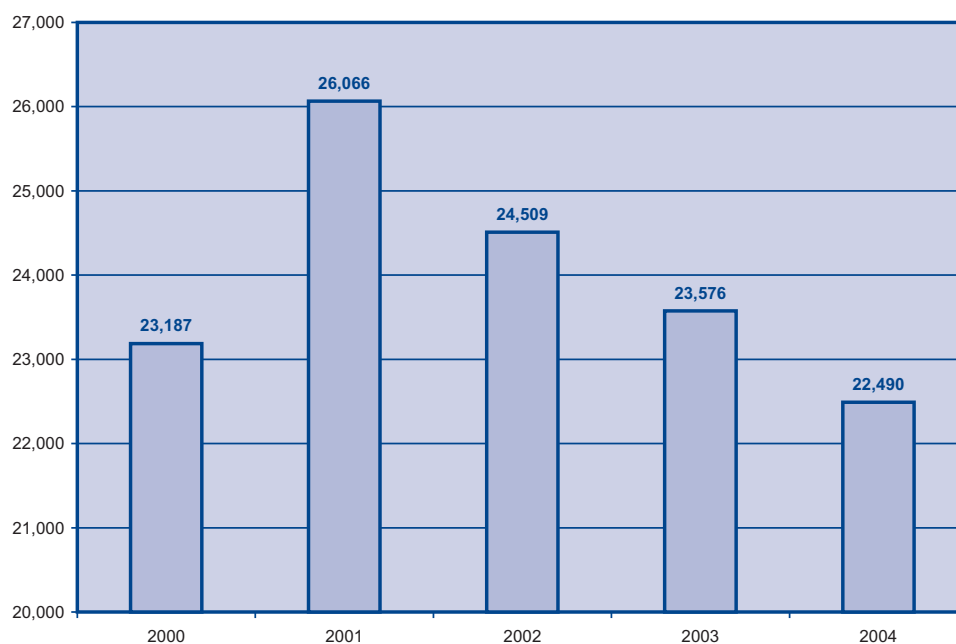
- Number of Reported Injuries Table 1
- Number of Claims Filed Table 2
- Temporary Total Disability Payments and Average Cost Per Case Table 3
- Permanent Partial Disability Payments and Average Cost Per Case Table 4
- Medical Only Cases and Average Cost Per Case Table 5
- Top Ten Distribution of Cases by Body Part Table 6
- Top Ten Distribution of Cases by Nature of Injury Table 7
- Top Ten Distribution of Cases by Cause of Injury Table 8
- Cases by Gender Table 9
- Cases by Lost Time and Medical Only Table 10
- Distribution of Cases by Insurance Type (Commercial or Self-insured) Tables 11A-E
- Local Office Map
- Distribution of Injuries by Local Office Table 12
- Distribution of Claims by Local Office Table 13
- Distribution of Cases (injuries and claims) by County Table 14
- Second Injury Fund Benefits Paid by Type Table 15
- Claims Filed Against the Second Injury Fund Table 16
- Disability Maximum Benefit Amounts Table 17
- Case Dispositions Table 18
- Number of Proceedings Table 19
- Percentage of Cases Resolved by Type of Proceeding Table 20
- Division of Workers' Compensation Activity Table Table 21

Table 1
Number of Reported Injuries
Calendar Years 2000-2004



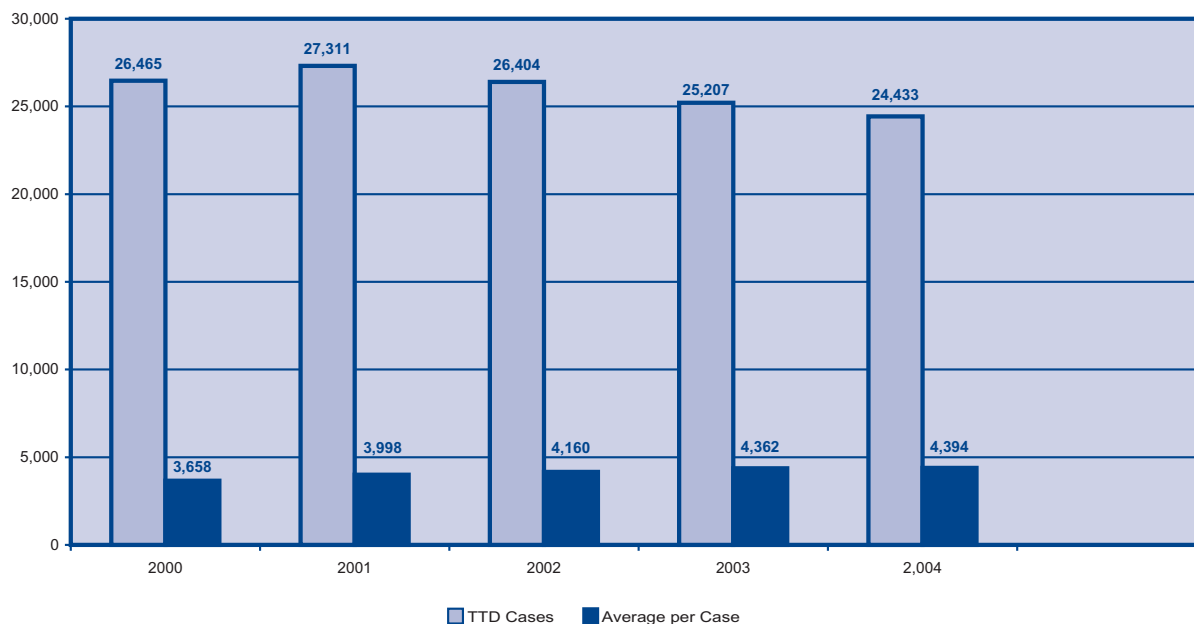
* Total number of injuries for CY 2003 will increase with cases reported through a Claim for Compensation being filed where no Report of Injury was filed.

Table 2
Number of Claims Filed
Calendar Years 2000-2004



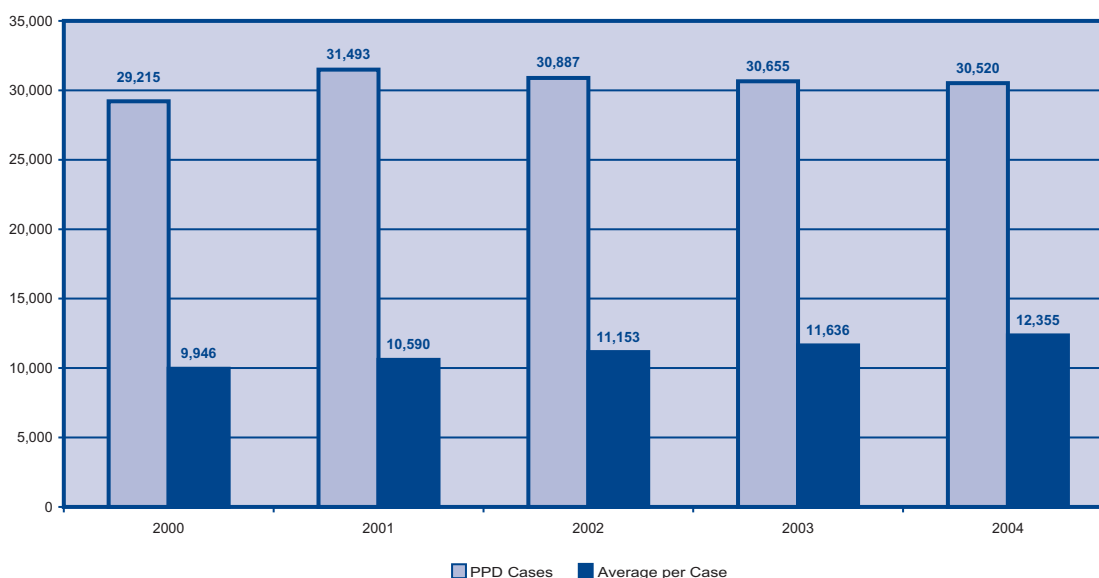
* A Claim for Compensation is a legal document filed by the injured worker that initiates a legal proceeding before the Division. It also informs the Division a dispute exists between the workers the employer/insurance carrier as to the facts of the case.

Table 3
Temporary Total Disability* Cases and Average Cost Per Case
Calendar Years 2000-2004



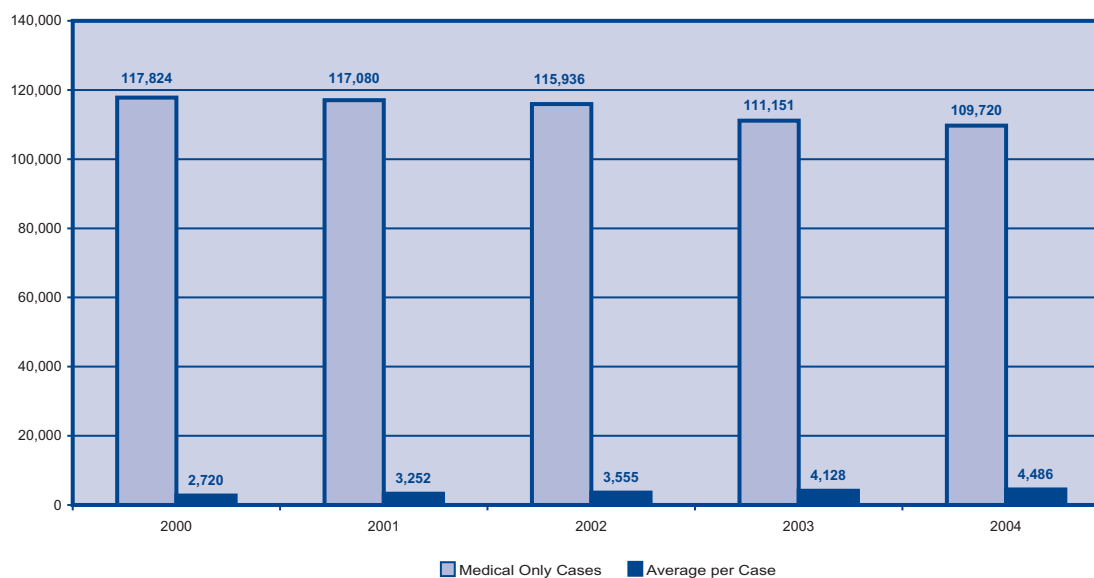
* Temporary Total Disability Benefits are paid when the injured worker misses more than three days from work because of the injury and equals sixty-six and two-thirds percent of the injured worker's average weekly wage not to exceed a certain maximum set by law.

Table 4
Permanent Partial Disability* Cases and Average Cost Per Case
Calendar Years 2000-2004



* Permanent Partial Disability Benefits are paid to the injured worker when it is determined there is a permanent disability as a result of the injury and equals sixty-six and two-thirds percent of the injured worker's average weekly wage not to exceed a certain maximum set by law.

Table 5
Medical Only Cases* and Average Cost per Case
Calendar Years 2000-2004



* Medical Only Cases are those where there is no lost time from worker as a result of the injury.

Table 6
Top Ten Distribution of Reported Injuries by Body Part
Calendar Years 2000-2004

<u>Body Part</u>	<u>2000</u>	<u>2001</u>	<u>2002</u>	<u>2003</u>	<u>2004</u>
LOW BACK AREA	13.3%	12.9%	12.7%	12.6%	12.1%
FINGER(S)	10.1%	9.9%	10.1%	10.1%	10.2%
HAND(S)	7.4%	7.3%	7.4%	7.4%	7.2%
KNEE(S)	6.5%	6.6%	6.7%	6.8%	7.0%
MULTIPLE BODY PARTS	5.9%	5.7%	5.8%	6.1%	6.4%
EYE(S)	5.2%	5.1%	4.6%	4.6%	4.5%
WRIST(S)	4.9%	4.9%	4.8%	4.7%	4.6%
SHOULDER(S)	4.7%	5.1%	5.2%	5.2%	5.5%
ANKLE(S)	3.5%	3.6%	3.7%	3.8%	3.7%
LOWER ARM(S)	3.5%	3.4%	3.5%	3.4%	3.6%

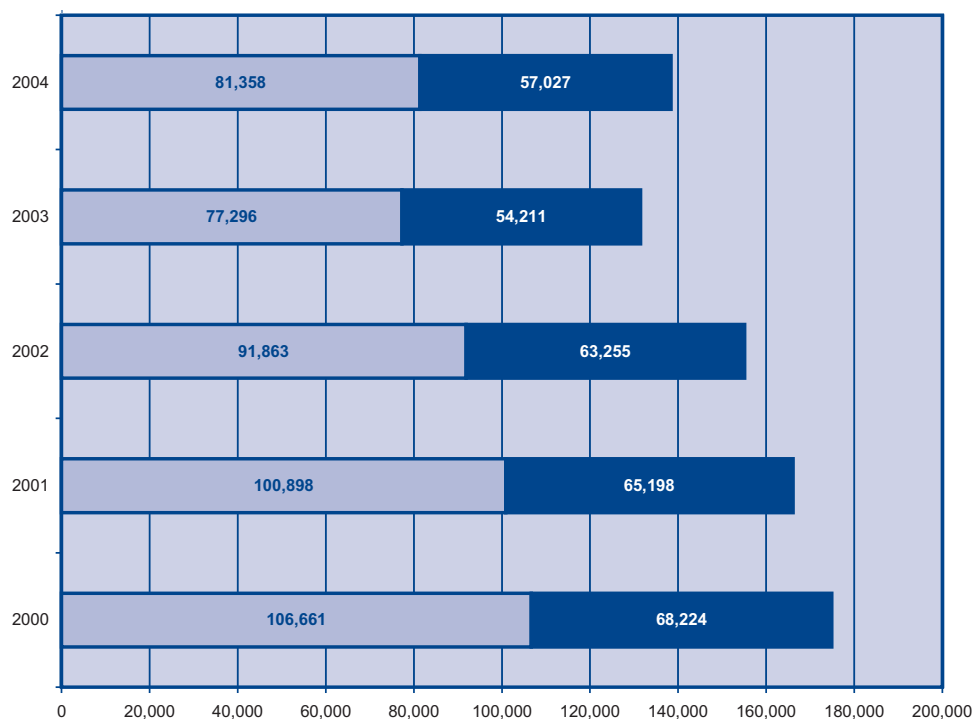
Table 7
Top Ten Distribution of Reported Injuries by Nature of Injury
Calendar Years 2000-2004

<u>Nature of Injury</u>	<u>2000</u>	<u>2001</u>	<u>2002</u>	<u>2003</u>	<u>2004</u>
STRAIN	31.4%	32.5%	32.0%	31.3%	31.3%
CONTUSION	15.3%	14.5%	14.6%	15.1%	14.8%
LACERATION	13.4%	13.0%	13.0%	13.4%	13.4%
SPRAIN	7.6%	7.9%	8.2%	8.6%	7.9%
ALL OTHER SPECIFIC INJURIES	7.0%	6.4%	6.2%	6.1%	5.7%
FOREIGN BODY	3.8%	3.6%	3.1%	3.7%	3.1%
PUNCTURE	3.4%	3.4%	3.6%	3.7%	3.9%
FRACTURE	3.3%	3.2%	3.3%	3.6%	3.4%
BURN	2.5%	2.4%	2.4%	2.3%	2.4%
INFLAMMATION	2.0%	2.1%	2.5%	2.6%	2.7%

Table 8
Top Ten Distribution of Reported Injuries by Cause of Injury
Calendar Years 2000-2004

<u>Cause of Injury</u>	<u>2000</u>	<u>2001</u>	<u>2002</u>	<u>2003</u>	<u>2004</u>
LIFTING	10.9%	11.0%	11.3%	11.2%	10.9%
STRAIN OR INJURY BY, NOC	5.2%	5.3%	5.4%	5.3%	5.5%
FALL, SLIP, TRIP, NOC	5.4%	5.3%	5.3%	5.0%	5.3%
REPETITIVE MOTION	4.3%	4.4%	4.5%	4.2%	3.6%
PUSHING OR PULLING	4.0%	3.9%	4.1%	4.0%	3.9%
OTHER-MISCELLANEOUS, NOC	4.2%	4.7%	4.2%	3.8%	3.6%
CUT, PUNCTURE, SCRAPE, NOC	3.7%	3.8%	3.7%	3.6%	3.7%
ON SAME LEVEL	3.8%	3.8%	4.2%	4.8%	4.7%
FALLING OR FLYING OBJECT	3.6%	3.4%	3.5%	3.5%	3.6%
FOREIGN MATTER (BODY) IN EYE(S)	3.5%	3.4%			2.9%
STRUCK OR INJURED			3.8%	3.2%	3.3%

Table 9
Reported Injuries by Gender*
Calendar Years 2000-2004



* Cases do not equal all reported injuries because gender was not reported on some Reports of Injury.

Table 10
Reported Injuries by Lost Time and Medical Only*
Calendar Years 2000-2004

Calendar Year	Lost Time Cases	Percentage of Total	Medical Only Cases	Percentage of Total	Total Lost Time and Medical Only Cases
2000	28,958	16.5%	146,312	83.5%	175,270
2001	27,291	16.4%	139,276	83.6%	166,567
2002	25,412	16.3%	130,667	83.7%	156,079
2003	23,981	16.7%	119,263	83.3%	143,244
2004	20,918	14.7%	121,435	85.3%	142,353

* Total Number of injuries for CY 2003 will increase with cases reported through a Claim for Compensation being filed where no Report or Injury was filed. In addition, more medical only cases will be classified as lost time cases as the Division receives additional information on a case.

Reported Injuries by Insurance Type

Table 11A
Calendar Year 2000

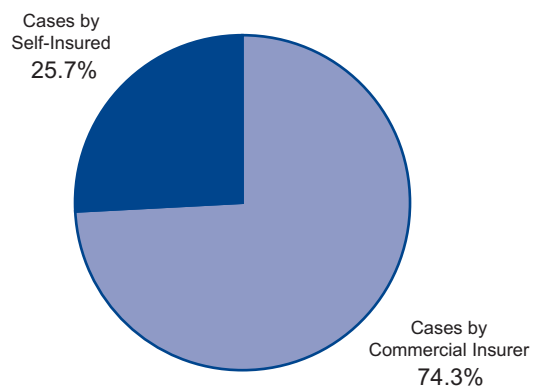


Table 11B
Calendar Year 2001

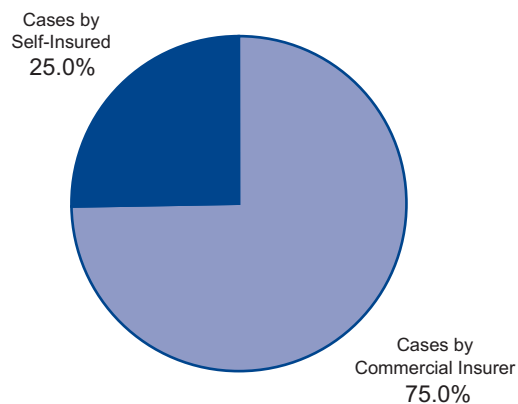


Table 11C
Calendar Year 2002

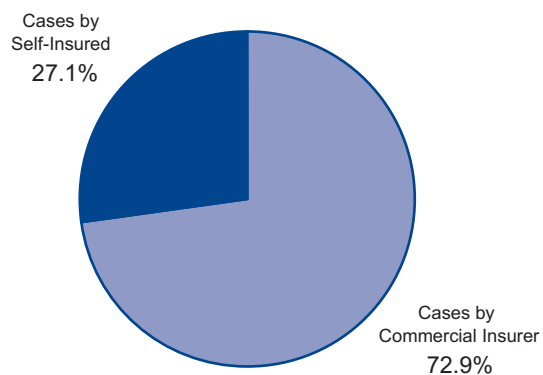


Table 11D
Calendar Year 2003

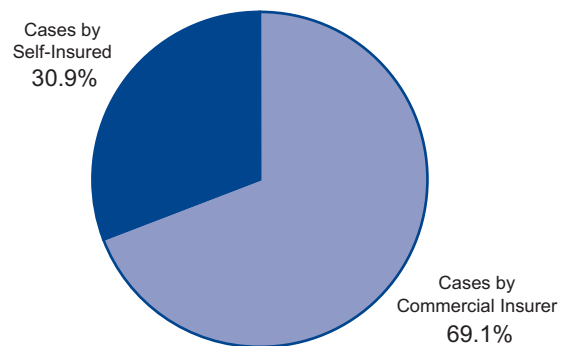
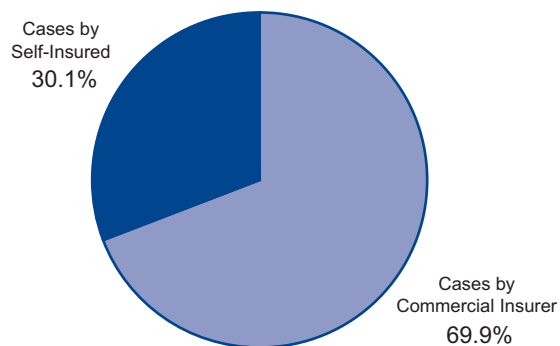
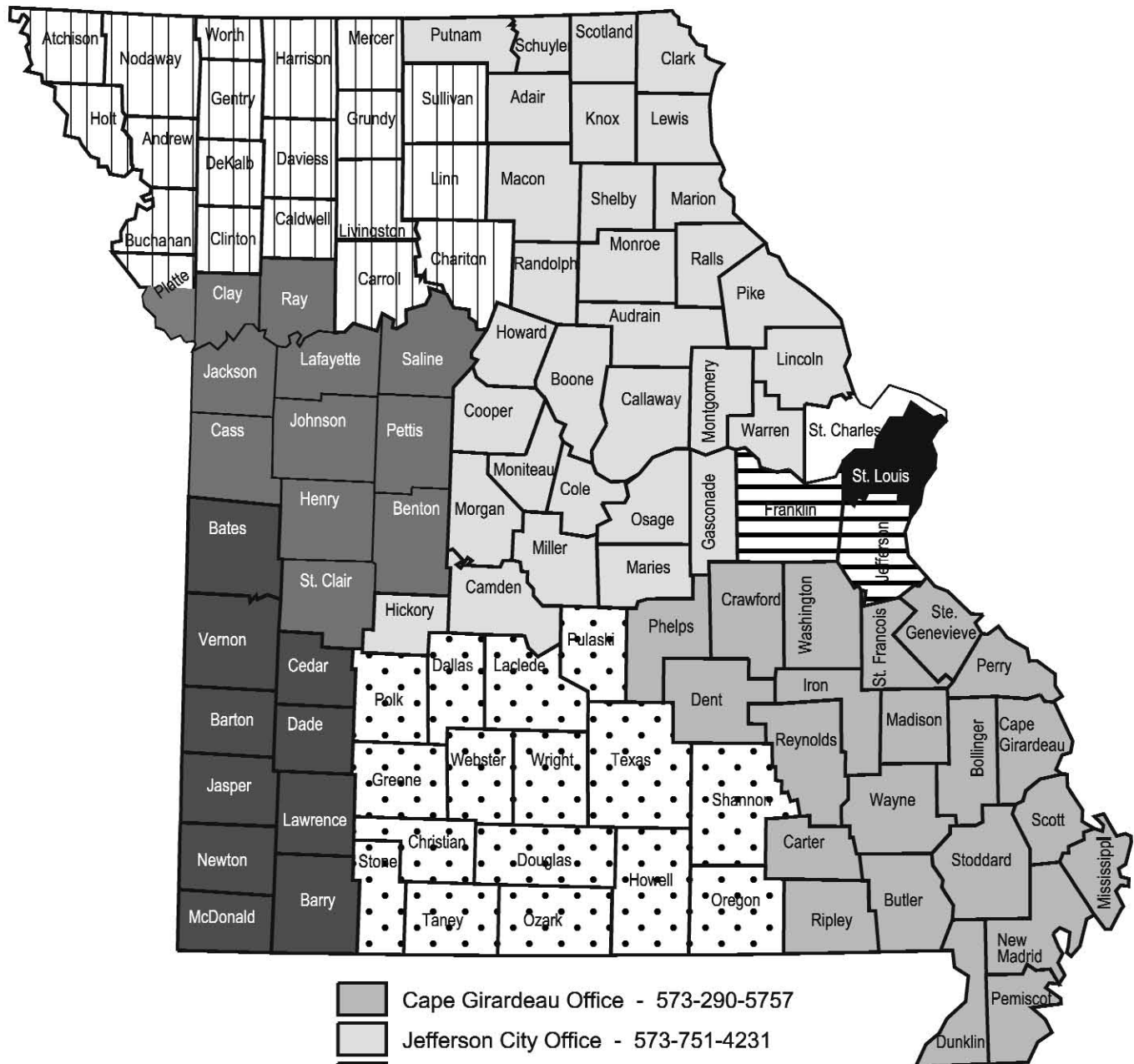


Table 11E
Calendar Year 2004



Local Office Map



-  Cape Girardeau Office - 573-290-5757
-  Jefferson City Office - 573-751-4231
-  Joplin Office - 417-629-3032
-  Kansas City Office - 816-889-2481
-  St. Charles Office - 314-940-1284
-  St. Joseph Office - 816-387-2275
-  St. Louis Office - 314-340-6865
-  Springfield Office - 417-888-4100

Table 12
Distribution of Injuries by Local Office*
Calendar Years 2000-2004

Local Office	2000	2001	2002	2003	2004
Cape Girardeau	12,285	12,276	11,792	11,301	1,932
Jefferson City	18,917	16,412	14,735	13,536	14,713
Joplin	12,103	10,449	9,464	8,036	8,541
Kansas City	35,878	36,750	35,010	33,175	32,769
Springfield	21,472	19,034	17,322	16,272	16,384
St. Charles	12,391	12,694	12,456	11,051	11,477
St. Joseph	9,181	8,377	7,303	6,919	6,676
St. Louis	53,026	50,567	47,963	42,787	39,825
Unassigned	17	8	34	67	36
Total	175,270	166,567	156,079	143,244	142,353

* Numbers based on county where injury occurred.

Table 13
Distribution of Claims by Local Office*
Calendar Years 2000-2004

Local Office	2000	2001	2002	2003	2004
Cape Girardeau	1,628	1,785	1,956	2,010	1,992
Jefferson City	1,868	2,011	1,814	1,620	1,716
Joplin	1,052	1,096	812	769	824
Kansas City	3,349	3,755	3,699	3,801	3,839
Springfield	1,769	2,125	1,926	1,801	1,699
St. Charles	2,143	2,469	2,419	2,156	2,238
St. Joseph	707	896	831	783	780
St. Louis	10,671	11,929	11,052	10,636	9402
Total	23,187	26,066	24,509	23,576	22,490

* Numbers based on county where injury occurred.

Table 14
Distribution of Reported Injuries and Claims by County*
Calendar Year 2004

COUNTY	Reported Injuries	Filed Claims	COUNTY	Reported Injuries	Filed Claims
ADAIR	479	42	DALLAS	173	28
ANDREW	78	14	DAVISS	70	10
ATCHISON	103	10	DEKALB	34	1
AUDRAIN	684	105	DENT	234	15
BARRY	921	80	DOUGLAS	129	11
BARTON	437	40	DUNKLIN	528	101
BATES	175	25	FRANKLIN	2,351	448
BENTON	198	26	GASCONADE	287	34
BOLLINGER	51	16	GENTRY	151	9
BOONE	3,967	371	GREENE	8,256	882
BUCHANAN	2,445	297	GRUNDY	160	16
BUTLER	1,306	221	HARRISON	92	3
CALDWELL	70	7	HENRY	432	52
CALLAWAY	1,159	124	HICKORY	28	8
CAMDEN	838	123	HOLT	66	2
CAPE GIRARDEAU	1,973	359	HOWARD	84	17
CARROLL	140	22	HOWELL	864	77
CARTER	62	10	IRON	127	64
CASS	1,181	147	JACKSON	20,504	2,662
CEDAR	222	21	JASPER	4,050	356
CHARITON	71	2	JEFFERSON	2,298	530
CHRISTIAN	672	72	JOHNSON	1,014	79
CLARK	89	9	KNOX	45	11
CLAY	5,064	519	LACLEDE	894	75
CLINTON	303	27	LAFAYETTE	582	71
COLE	2,713	297	LAWRENCE	495	43
COOPER	345	39	LEWIS	153	23
CRAWFORD	332	69	LINCOLN	561	134
DADE	90	15	LINN	378	24

COUNTY	Reported Injuries	Filed Claims	COUNTY	Reported Injuries	Filed Claims
LIVINGSTON	330	33	RANDOLPH	626	62
MACON	307	19	RAY	257	28
MADISON	156	30	REYNOLDS	110	16
MARIES	45	6	RIPLEY	117	14
MARION	859	128	SALINE	688	85
MCDONALD	464	32	SCHUYLER	32	2
MERCER	169	11	SCOTLAND	81	4
MILLER	514	64	SCOTT	1,049	146
MISSISSIPPI	213	27	SHANNON	58	10
MONITEAU	206	27	SHELBY	66	10
MONROE	210	24	ST CHARLES	6,512	1,287
MONTGOMERY	302	42	ST CLAIR	81	11
MORGAN	187	18	ST FRANCOIS	1,338	237
NEW MADRID	347	96	ST LOUIS CITY	8,869	2,495
NEWTON	669	62	ST LOUIS CO	29,611	7,274
NODAWAY	606	46	STE GENEVIEVE	361	47
OREGON	69	8	STODDARD	650	100
OSAGE	258	26	STONE	219	36
OZARK	83	8	SULLIVAN	100	8
PEMISCOT	227	68	TANEY	1,602	117
PERRY	766	113	TEXAS	334	32
PETTIS	1,248	163	VERNON	479	56
PHELPS	1,190	129	WARREN	394	76
PIKE	395	60	WASHINGTON	326	52
PLATTE	81	45	WAYNE	104	26
POLK	452	59	WEBSTER	425	43
PULASKI	508	55	WORTH	11	0
PUTNAM	58	4	WRIGHT	192	33
RALLS	56	7			

* Cases will not equal total injuries reported because some injuries occurred out of state.

Table 15
Total Second Injury Fund Benefits Paid by Type
Calendar Years 2000-2004

Benefit Type	2000	2001	2002	2003	2004
Death	\$ 123,606.08	\$ 226,355.30	\$ 55,810.08	\$ 420,794.29	\$ 295,451.41
Lost Wages	\$ 147,687.33	\$ 162,167.55	\$ 250,690.07	\$ 340,462.33	\$ 277,514.25
Medical	\$ 629,874.33	\$ 749,756.35	\$ 629,129.71	\$ 765,430.92	\$ 736,964.77
PPD	\$20,450,828.98	\$26,687,694.05	\$34,810,285.78	\$38,829,384.19	\$44,643,461.61
PTD	\$ 7,918,283.53	\$11,041,873.67	\$11,775,044.57	\$13,170,923.58	\$16,425,309.12
Rehabilitation	\$ 118,930.36	\$ 180,696.12	\$ 234,421.11	\$ 243,434.31	\$ 173,150.04

* Attorney General expenses are for defense of the Second Injury Fund against filed Claims.

Table 16
Claims Filed Against Second Injury Fund – Employer/Insurer/SIF and SIF Only
Calendar Years 2000-2004

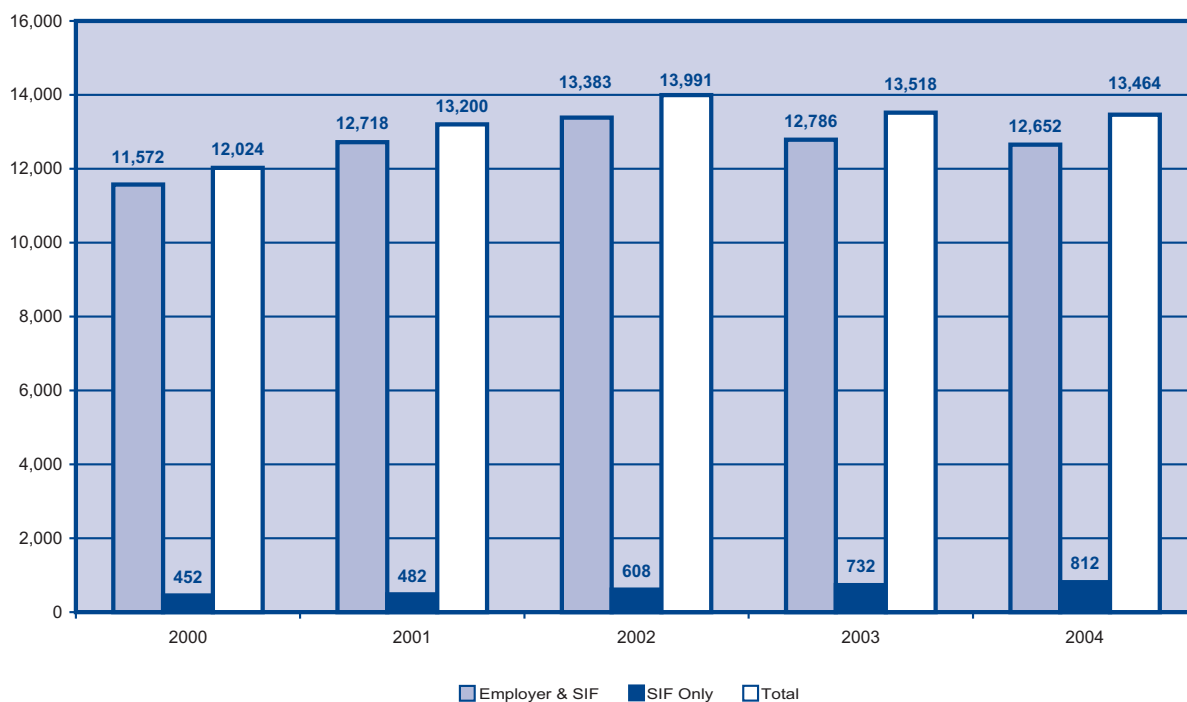


Table 17
Disability Maximum Benefit Amounts
Fiscal Years 1992-2005

Effective Date	Temporary Total 287.170 Max.	Permanent Partial 287.190 Max.	Perm. Total 287.200 Death 287.240. Max.
7/1/1992 To 8/27/1992	105% SAWW \$449.80	52% SAWW \$222.76	105% SAWW \$449.80
8/28/1992 To 6/30/1993	105% SAWW \$449.80	55% SAWW \$235.61	105% SAWW \$449.80
7/1/1993 To 6/30/1994	105% SAWW \$470.06	55% SAWW \$246.22	105% SAWW \$470.06
7/1/1994 To 6/30/1995	105% SAWW \$476.28	55% SAWW \$249.48	105% SAWW \$476.28
7/1/1995 To 6/30/1996	105% SAWW \$491.19	55% SAWW \$257.29	105% SAWW \$491.19
7/1/1996 To 6/30/1997	105% SAWW \$513.01	55% SAWW \$268.72	105% SAWW \$513.01
7/1/1997 To 6/30/1998	105% SAWW \$531.52	55% SAWW \$278.42	105% SAWW \$531.52
7/1/1998 To 6/30/1999	105% SAWW \$562.67	55% SAWW \$294.73	105% SAWW \$562.67
7/1/1999 To 6/30/2000	105% SAWW \$578.48	55% SAWW \$303.01	105% SAWW \$578.48
7/1/2000 To 6/30/2001	105% SAWW \$599.96	55% SAWW \$314.26	105% SAWW \$599.96
7/1/2001 To 6/30/2002	105% SAWW \$628.90	55% SAWW \$329.42	105% SAWW \$628.90
7/1/2002 To 6/30/2003	105% SAWW \$649.32	55% SAWW \$340.12	105% SAWW \$649.32
7/1/2003 To 6/30/2004	105% SAWW \$662.55	55% SAWW \$347.05	105% SAWW \$662.55
7/1/2004 To 6/30/2005	105% SAWW \$675.90	55% SAWW \$354.05	105% SAWW \$675.90

Table 18
Case Dispositions
Calendar Years 2000-2004

Calendar Year	Awards	Settlements	Dismissals	Total Dispositions
2000	764	33,981	12,064	46,809
2001	757	35,187	11,911	47,855
2002	807	35,302	12,643	48,752
2003	826	35,558	11,961	48,345
2004	799	35,940	12,564	49,303

Table 19
Proceedings Held Before an Administrative Law Judge or Legal Advisor
Calendar Years 2000-2004

Calendar Year	Conferences	Prehearings	Mediations	Hearings
2000	22,637	48,883	23,496	950
2001	18,734	56,514	21,877	921
2002	22,347	61,871	25,480	872
2003	21,685	60,651	23,673	928
2004	22,463	60,615	22,592	929

Table 20

Percentage of Cases with Claim Filed Resolved at Prehearing, Mediation or Hearing
Cases Closed 2000-2004, Statewide and by Local Office

Year of Closure	Resolved at Prehearing	Resolved at Mediation	Resolved at Hearing	Year of Closure	Resolved at Prehearing	Resolved at Mediation	Resolved at Hearing
Statewide				Cape Girardeau			
2000	62.4	34.6	3.0	2000	49.5	47.2	3.2
2001	63.6	33.7	2.7	2001	32.7	64.4	2.8
2002	63.0	33.7	3.3	2002	28.2	68.2	3.1
2003	62.9	33.9	3.2	2003	31.0	65.9	3.1
2004	66.3	30.5	3.2	2004	32.4	64.5	3.1
Jefferson City				Joplin			
2000	70.0	26.9	3.1	2000	94.7	0.7	4.6
2001	70.0	27.2	2.8	2001	96.7	0.7	2.6
2002	74.9	21.7	3.4	2002	95.8	0.4	3.7
2003	72.2	24.8	3.0	2003	96.1	0.5	3.4
2004	71.8	25.1	3.1	2004	94.4	0.5	5.1
Kansas City				St. Charles			
2000	32.9	61.3	5.8	2000	71.5	25.8	2.7
2001	33.2	61.6	5.2	2001	71.6	26.3	2.1
2002	32.1	61.2	6.7	2002	70.2	26.8	2.9
2003	32.9	60.9	6.2	2003	71.1	26.3	2.6
2004	32.4	61.2	6.4	2004	71.1	26.5	2.4
St. Joseph				St. Louis			
2000	77.8	16.7	5.6	2000	62.8	35.4	1.9
2001	78.5	17.2	4.3	2001	67.4	30.6	1.9
2002	80.9	16.1	3.1	2002	67.0	30.7	2.3
2003	79.8	16.9	3.3	2003	66.9	30.8	2.3
2004	78.8	17.3	3.9	2004	66.8	31.1	2.1
Springfield							
2000	67.0	28.4	4.6				
2001	64.1	32.1	3.8				
2002	67.4	28.0	4.6				
2003	66.8	28.5	4.7				
2004	67.1	28.6	4.3				

Table 21
Division of Workers' Compensation Activity
Calendar Years 2000-2004

Calendar Year	Missouri Employed Workers	Injury Reports	Paid Indemnity Claims	Claims for Compensation	Informal Conferences Held	Prehearing Conferences Held
2000	2,689,200	175,270	37,551	23,187	22,637	48,883
2001	2,676,000	166,567	34,920	26,066	18,734	56,514
2002	2,627,200	156,079	35,614	24,509	22,347	61,871
2003	N/A	143,244*	N/A	23,576	21,685	60,651
2004	N/A	142,357	35,812	21,662	22,463	60,615
Calendar Year	Mediations Held	Hearings Held	Awards	Appeals to Commission	Appeals to Court of Appeals	
2000	23,496	950	764	453	137	
2001	21,877	921	757	397	156	
2002	25,480	872	807	445	113	
2003	23,673	928	826	429	121	
2004	22,592	929	799	432	119	

* Total number of injuries for CY 2003 will increase with cases reported through a Claim for Compensation being filed where no Report of Injury was filed.

Publications

Free Informational Pamphlets and Booklets

- Employee's Guide to the Missouri Workers' Compensation System – English and Espanol (WC-118)
- Employer's Guide to Workers' Compensation Insurance (WC-119)
- Facts for Injured Workers – English and Espanol (WC-101)
- Missouri Workers' Safety Program (WC-123)
- Dispute Management Process (WC-107)
- Appeals Rights and Procedures (WC-116)
- Missouri's Second Injury Fund (WC-120)
- Self-Insuring Workers' Compensation Liability (WC-125)
- Self-Insuring Workers' Compensation Liability Through Trusts (WC-124)
- Rules Governing Self-Insurance (WC-112)
- Workers' Compensation: Fraud and Noncompliance (FN-09)
- Crime Victims' Compensation – English and Espanol (CV-14)
- Missouri Workers' Compensation Poster (WC-106)
- Factors That May Affect an Employee's Workers' Compensation Case: A Brief Summary (WC-136)

Missouri Department of Labor and Industrial Relations
Division of Workers' Compensation
3315 West Truman Blvd., Room 131
PO Box 58
Jefferson City, MO 65102-0058
(573) 751-4231
www.dolir.mo.gov/wc